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**32nd INTERNATIONAL CONFERENCE  
OF THE RED CROSS AND RED CRESCENT**

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**Health Care in Danger:  
Continuing to protect the delivery of health care together**

**Resolution**

## RESOLUTION

### **Health Care in Danger: Continuing to protect the delivery of health care together**

The 32nd International Conference of the Red Cross and Red Crescent (International Conference),

*deeply concerned* about attacks, threats and obstructions affecting the wounded and sick, health-care personnel and facilities, and medical transports as well as the misuse of health-care facilities, medical transports or the distinctive emblems and other impediments to the delivery of health care in times of armed conflict or other emergencies, and *deploring* the fact that such acts lead to serious humanitarian consequences, including loss of life and widespread suffering, and to the weakening of the capacity of health systems on a national and regional level to provide health care to affected populations,

*recalling* Resolution 5 of the 31st International Conference entitled “Health care in danger: Respecting and protecting health care,” including its call upon the International Committee of the Red Cross (ICRC) in operative paragraph 14 “to initiate consultations with experts from States, the International Federation, National Societies and other actors in the health-care sector, with a view to formulating practical recommendations for making the delivery of health care safer” in armed conflicts or other emergencies, in accordance with the applicable legal frameworks, “and to report to the 32nd International Conference in 2015 on the progress made,”

*welcoming* the expert consultations held between 2012 and 2014 and *taking note with appreciation* of the practical recommendations resulting therefrom, as well as the progress report submitted by the ICRC pursuant to operative paragraph 14 of Resolution 5 of the 31st International Conference,

*expressing* its appreciation for the specific role played by States, National Red Cross and Red Crescent Societies (National Societies) and health-care professional associations in hosting expert consultations,

*welcoming* the ongoing efforts made by States, the International Red Cross and Red Crescent Movement (Movement) and other actors in the health-care sector to improve the protection of the delivery of health care, in accordance with the applicable international and domestic legal frameworks, and efforts to implement relevant practical recommendations as well as to follow good practices in this regard,

*bearing in mind* that international humanitarian law applies only to situations of armed conflict and *recognizing* that international humanitarian law and applicable international human rights law provide a framework for protecting health care,

*stressing* that this Resolution does not give rise to new obligations under international law,

*also stressing* that this Resolution does not expand or modify the mandates, roles and responsibilities of the components of the Movement as prescribed in the Statutes of the Movement,

*recalling* the obligations to respect and protect the wounded and sick, health-care personnel and facilities, as well as medical transports, and to take all reasonable measures to ensure safe and prompt access to health care for the wounded and sick, in times of armed conflict or other emergencies, in accordance with the applicable legal frameworks,

*calling for* all States and all stakeholders to respect the integrity of medical and health-care personnel in carrying out their duties in line with their respective professional codes of ethics and scope of practice,

*bearing in mind* the specific health-care needs of certain categories of the wounded and sick, including children, women, persons with disabilities and the elderly,

*stressing* that identification of health-care personnel, facilities, and medical transports as such may enhance their protection, and in this regard *recalling* international legal obligations pertaining to the use and the protection of the distinctive emblems under the 1949 Geneva Conventions, and where applicable, their Additional Protocols,

*recalling* the Statutes of the Movement, in particular the mission of the components of the Movement as stated in the preamble of these Statutes, which guide the work of the Movement to make the delivery of health care safer in armed conflict or other emergencies,

*stressing*, in particular, the importance of the Fundamental Principles of the Movement and *recalling* that “States shall at all times respect the adherence by all components of the Movement to the Fundamental Principles,” as laid down in the Statutes of the Movement,

*emphasizing*, in this context, the principle of humanity, whereby human suffering shall be prevented and alleviated wherever it may be found, and the principle of impartiality, whereby no discrimination on grounds of nationality, race, religious beliefs, class, political opinions or gender shall be made between individuals whose suffering is to be relieved, being guided solely by their needs and giving priority to the most urgent cases of distress,

*recalling* the importance of health-care personnel having sufficient practical knowledge of their rights and responsibilities, in accordance with the applicable legal frameworks and with their professional codes of ethics and scope of practice, and *stressing* that health-care personnel should be able to offer their services without obstruction, threat or physical attack,

*stressing* the need for continued and, where relevant and appropriate, strengthened cooperation between States, the Movement, international and national health-care professional associations and other health-care providers, international and regional organizations, civil society, religious and community leaders, affected communities and other relevant stakeholders to raise awareness, promote preparedness to address and address violence against the wounded and sick, health-care personnel and facilities, and medical transports, especially at a national level, bearing in mind existing roles, mandates and capacities,

1. *urges* full respect by all parties to armed conflicts for their obligations under international humanitarian law and by States for their obligations under international human rights law, as applicable and relevant for the protection of the wounded and sick and health-care personnel, facilities, and medical transports exclusively engaged in medical duties;
2. *recalls*, in this regard, the prohibitions against attacking the wounded and sick, health-care personnel and facilities, and medical transports, against arbitrarily denying or limiting access for the wounded and sick to health-care services, and against harassing, threatening or punishing health-care personnel for carrying out their duties, in accordance with the applicable legal frameworks;
3. *notes* that attacking, threatening or otherwise preventing health-care personnel from fulfilling their medical duties undermines their physical safety and the integrity of their professional codes of ethics;

4. *expresses* its deep concern about attacks against health-care personnel and facilities, and reaffirms the commitment of all components of the Movement to the protection of health-care personnel, facilities and medical transports as afforded by international humanitarian law, and calls upon States, as are required, to conduct full, prompt and independent investigations with a view to reinforcing preventive measures, ensuring accountability and addressing the grievances of victims;
5. *calls upon* States, where relevant and appropriate, to adopt and effectively implement the required domestic measures, including legislative, regulatory and practical ones, to ensure respect for their international legal obligations pertaining to the protection of the wounded and sick and health-care personnel, facilities, and medical transports, and the protection and use of the distinctive emblems by authorized medical personnel, facilities and transports;
6. *calls upon* States to ensure that their armed forces and security forces, within their respective competencies under domestic law, make or, where relevant, continue their efforts to integrate practical measures for the protection of the wounded and sick and health-care services into the planning and conduct of their operations;
7. *calls upon* States, where relevant, also to contribute to the integration of such practical measures by armed forces and security forces in the operational practices and procedures of regional or international organizations;
8. *calls upon* States, in cooperation with the Movement, the health-care community and other relevant stakeholders, as appropriate, to enhance their understanding of the nature of violence affecting the delivery of health-care services with a view to developing and effectively implementing domestic legal, regulatory and practical measures for preventing and addressing such violence, where relevant, and to this end, *encourages* States and the Movement, in cooperation with the health-care community and other relevant stakeholders, to regularly share challenges and good practices in this regard;
9. *calls upon* States and the Movement, in cooperation with the health-care community and academia, as appropriate, to continue making use of or otherwise support existing training tools or, where relevant, developing new tools to enhance the understanding by health-care personnel of their rights and responsibilities resulting from applicable law and their professional codes of ethics, as well as understanding of national and local customs and traditions, in accordance with the applicable legal frameworks, and of dilemmas in the discharge of their legal and ethical responsibilities and *stresses* that this may contribute to behaviour that could increase their acceptance with local communities and thereby to their safety and security;
10. *calls upon* States and the Movement, in cooperation with the health-care community and academia, as appropriate, to intensify or otherwise support efforts to make instruction on the rights and responsibilities of health-care personnel part of the curricula of relevant university faculties, including but not limited to medical faculties, and of training institutions for health-care personnel;
11. *calls upon* National Societies, the ICRC and the International Federation of Red Cross and Red Crescent Societies to continue supporting and strengthening the capacity of local health-care facilities and personnel around the world and to continue providing training and instruction for health-care staff and volunteers by developing appropriate tools on the rights and obligations of health-care personnel and on protection for and the safety of health-care delivery, to the extent possible;
12. *calls upon* States and the Movement, where relevant, and in cooperation with affected local communities and their leaders, to enhance the secure functioning of health-care facilities through preparatory and practical measures;

13. *calls upon* States and National Societies, where relevant, to engage or continue to engage with each other, with a view to strengthening domestic law, regulations and practice regarding the auxiliary role of National Societies to the public authorities in the humanitarian field for the safer delivery of health care, including the effective coordination of their respective health-care services, and *calls upon* National Societies, in the fulfilment of that auxiliary role, to promote and support the implementation of States' international legal obligations and dissemination efforts in this regard;
14. *calls upon* National Societies to intensify their commitment and efforts to increase their acceptance, safety and security in order to access persons in communities where they deliver health-care services, including by providing training or other support to their staff and volunteers to ensure that they operate in accordance with the Fundamental Principles of the Movement, by applying existing operational approaches and approaches designed to enhance the organizational development of National Societies, such as the Safer Access Framework, and by continuing to work, where relevant, on specific procedures, protocols and capacities to enhance risk management and the overall security of their ambulance and emergency health-care services, and *encourages* other National Societies, the ICRC and the International Federation, as appropriate, to support them in these efforts.